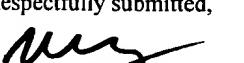


Express Mail Mailing Label No. EV192308583US

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number BMA-005																														
<p>In re Application of Laugharn et al. Application Serial No. 09/830,473 Filed: April 27, 2001 Group Art Unit: 1723 Examiner: Soohoo</p> <p style="text-align: right;"><i>RECEIVED OCT 16 2003 TC 1700</i></p>																																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p>																																
<p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p>																																
<table><tbody><tr><td><input checked="" type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ 110.00</td></tr><tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$55.00</u>.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>A check in the amount of the fee is enclosed.</td><td></td></tr><tr><td><input type="checkbox"/></td><td>The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>Return receipt postcard enclosed.</td><td></td></tr></tbody></table>			<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$	<input checked="" type="checkbox"/>	Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$55.00</u> .		<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.		<input type="checkbox"/>	The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.		<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.		<input checked="" type="checkbox"/>	Return receipt postcard enclosed.	
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 110.00																														
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$																														
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$																														
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$																														
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$																														
<input checked="" type="checkbox"/>	Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$55.00</u> .																															
<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.																															
<input type="checkbox"/>	The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.																															
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.																															
<input checked="" type="checkbox"/>	Return receipt postcard enclosed.																															
<p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p>																																
<p style="text-align: center;">Registration number if acting under 37 CFR 1.34(a). .</p>																																
CORRESPONDENCE ADDRESS	SIGNATURE BLOCK																															
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	<p>Date: October 2, 2003 Reg. No. 50,773 Tel. No.: (617) 248-7453 Fax No.: (617) 248-7100</p> <p>Respectfully submitted,  Mark L Beloborodov Atty/Agent for Applicant(s) Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110</p>																															

VER 12/00
2691429_1

10/09/2003 RADDFO1 00000075 09830473
01 FC:2251 55.00 0P